

To: Williams, Laura[williams.laura@epa.gov]
From: Ostrander, David
Sent: Thur 8/13/2015 3:26:05 PM
Subject: FW: Abandoned Mine Release into Animas River - Health & Safety Training, and Medical Surveillance

From: Kovak, Brian
Sent: Thursday, August 13, 2015 9:26:03 AM (UTC-07:00) Mountain Time (US & Canada)
To: OSWER OEM REMOVAL MANAGERS
Cc: Carpenter, Wesley; Cheatham, Reggie; Woolford, James
Subject: FW: Abandoned Mine Release into Animas River - Health & Safety Training, and Medical Surveillance

RM's,

I am recommending to the Regions that they only deploy their staff in support of an Emergency Response Incident, that already have a medical clearance from participating in our Occupational Medical Surveillance Program, or that they receive an expedited medical clearance from their local Federal Occupational Health (FOH) clinic. I had initially set this program up with SHEMD in 2005, during our Hurricane Katrina response, specifically for Regional Support Corps (RSC) members and non-field employees who volunteer or are asked to assist with an emergency response incident. Some regions are either not following this practice consistently, or are only doing so for field workers (sampling, air monitoring, etc) and not for all employees being deployed to work with the field Incident Management Team (IMT). In addition, they should have field safety training for the activities they will be involved in (24 hr basic field safety or 40 hr Hazwoper training). I am working with the Regional SHEMP Managers, SHEMD and FOH to address and resolve this issue.

Thanks,
Brian

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From: Kovak, Brian
Sent: Thursday, August 13, 2015 9:36 AM
To: Nakatsu, Jason
Cc: Krueger, Roy; Gomez, Kendra; Woodlee, Jeff; Beasley, Craig; Wynn, David; Greenberg, Marc
Subject: Re: Abandoned Mine Release into Animas River - Health & Safety Training, and Medical Surveillance

After reviewing our RSC procedures and discussions with David Wynn in SHEMD, I highly recommend that we require that all EPA employees being deployed to work in support of an Emergency Response either already be enrolled in our Occupational Medical Surveillance Program and medically cleared for field work, or if not, they undergo an expedited medical clearance through FOH as setup under our RSC program.

Once an EPA employee leaves the regional office to participate in an Incident Management Team in the field, we no longer have control over their work activities. In a fast paced ER situation, they can be

reassigned on site or asked to assist in other duties or field work locations by the Incident Commander or their Section Chief in support of the ER mission. Therefore, they need to have a medical clearance. We have had situations during past ERs with non-field employees having underlying medical conditions, stress issues and being not physically or medically suited for the high stress environment and demands of working in an IMT during an ER. The expedited medical clearance will help assure we are taking the necessary steps to protect our employees prior to deploying them.

During DeepWater Horizon, BP hired locals to work on the oil spill clean-up with no medical screening. I am aware of 3-4 fatalities that occurred with these workers from off hour heart attacks and strokes most likely due to the stress and rigors of working the long 14 hour days under adverse conditions. We should not and can not place our employees in a similar situation. I will work with SHEMD and FOH to get the expedited medical clearance streamlined and setup quickly across the regions as needed. Inform your senior managers of the need to have this program implemented prior to deploying your staff to the field.

Thanks,
Brian

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